

E.J. FIELDS MACHINE WORKS, INC.

EMPLOYMENT APPLICATION

MAIL TO:

E.J. Fields Machine Works

Personnel

P.O. Box 608

Morgan City, LA 70381

FAX TO:

Personnel

985-384-3807

Please Print and Fill Out Completely. Do NOT use "Refer to Resumé."
 A resumé may be attached to supplement this action.

It is the continuing policy of E. J. Fields Machine Works, Inc. to provide equal opportunity in all aspects of employment without regard to race, color, religion, age, sex, national origin, disability, veteran status, or any other non-job related factor.

PERSONAL INFORMATION

Name:	Date:	
LAST	FIRST	MI
STREET	CITY	STATE ZIP
STREET	CITY	STATE ZIP
Present Telephone: () -	Permanent Telephone: () -	
U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, do you have a legal right to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No	Social Security #:
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been employed by E.J. Fields Machine Works, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Dates:		
Have you ever previously applied at E.J. Fields Machine Works, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Dates: Position applied for:		
Are any of your relatives or friends employed by E.J. Fields Machine Works, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list name and relationship:		Date Available for Employment:
Have you ever been dismissed from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:		
Do you have a valid Louisiana Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No Driver's License #: Expiration Date:		
Have you ever been convicted of any driving violations within the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please state the nature of violation(s), date(s), and location(s):		
Have you ever been convicted of a felony or a misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please describe the conviction, including the nature of the offense, date, location, and rehabilitation since the conviction (please use a blank sheet of paper if you need additional space):		
Referral Source: <input type="checkbox"/> E.J. Fields' Employee <input type="checkbox"/> Advertisement <input type="checkbox"/> Walk-in <input type="checkbox"/> Other:		

EDUCATION AND TRAINING

Circle Highest Grade Completed:	GRADE SCHOOL								HIGH SCHOOL				COLLEGE				GRADUATE SCHOOL				Grade/ G.P.A.
	1	2	3	4	5	6	7	8	1	2	3	4	1	2	3	4	1	2	3	4	
Name of School Location (City and State)	Dates Attended		Did You Graduate?		Numbers of Hours Completed?		Date and Type of Certificate or Degree Rec'd.														
	From	To	Yes	No	Major	Minor															
High School	Mo. Yr.	Mo. Yr.	<input type="checkbox"/>	<input type="checkbox"/>																	
College	Mo. Yr.	Mo. Yr.	<input type="checkbox"/>	<input type="checkbox"/>																	
Trade School	Mo. Yr.	Mo. Yr.	<input type="checkbox"/>	<input type="checkbox"/>																	

NAME: DATE:

Please Print and Fill Out Completely. Do NOT use "Refer to Resumé."
 A resumé may be attached to supplement this action.

It is the continuing policy of E. J. Fields Machine Works, Inc. to provide equal opportunity in all aspects of employment without regard to race, color, religion, age, sex, national origin, disability, veteran status, or any other non-job related factor.

PERSONAL INFORMATION

Name:	Date:	
LAST	FIRST	MI
STREET	CITY	STATE ZIP
STREET	CITY	STATE ZIP
Present Telephone: () -	Permanent Telephone: () -	Social Security #:
U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, do you have a legal right to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been employed by E.J. Fields Machine Works, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Dates:		
Have you ever previously applied at E.J. Fields Machine Works, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Dates: Position applied for:		
Are any of your relatives or friends employed by E.J. Fields Machine Works, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please list name and relationship:		Date Available for Employment:
Have you ever been dismissed from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:		
Do you have a valid Louisiana Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No		Driver's License #: Expiration Date:
Have you ever been convicted of any driving violations within the last 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please state the nature of violation(s), date(s), and location(s):		
Have you ever been convicted of a felony or a misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please describe the conviction, including the nature of the offense, date, location, and rehabilitation since the conviction (please use a blank sheet of paper if you need additional space):		
Referral Source: <input type="checkbox"/> E.J. Fields' Employee <input type="checkbox"/> Advertisement <input type="checkbox"/> Walk-in <input type="checkbox"/> Other:		

EDUCATION AND TRAINING

Name of School Location (City and State)	Dates Attended		Did You Graduate?		Numbers of Hours Completed?		Date and Type of Certificate or Degree Rec'd.	Grade/ G.P.A.
	From	To	Yes	No	Major	Minor		
High School	Mo. Yr.	Mo. Yr.	<input type="checkbox"/>	<input type="checkbox"/>				
College	Mo. Yr.	Mo. Yr.	<input type="checkbox"/>	<input type="checkbox"/>				
Trade School	Mo. Yr.	Mo. Yr.	<input type="checkbox"/>	<input type="checkbox"/>				

MILITARY SERVICE

Military Service? Yes No Branch of Service: _____ Date of Military Service: _____

Duties/Specialties: _____

Present Military Status: Active Inactive Rank at Separation: _____

Have Worked On/In: Mfg./Machine Shop

Machinery Operated: _____

Licenses, Certifications, Other Relevant Skills and Qualifications: _____

REFERENCES

Please list three People (other than relatives) who have known you for at least one year and who are qualified to evaluate your professional skills.

Name: _____ Organization: _____

Occupation: _____ Address: _____ Zip: _____ Phone: () - _____

Name: _____ Organization: _____

Occupation: _____ Address: _____ Zip: _____ Phone: () - _____

Name: _____ Organization: _____

Occupation: _____ Address: _____ Zip: _____ Phone: () - _____

PLEASE READ AND SIGN BELOW

I acknowledge that the information provided on this application and any other application materials (and accompanying resume, if any) is true, complete and correct to the best of my knowledge. I understand and agree that any incorrect statement, falsification, material misrepresentation, or omission of any information in connection with this application, resume and/or other application materials, whenever or however discovered, may disqualify me from further consideration for employment or, if I am hired, may result in my dismissal from employment.

I authorize a thorough investigation of me, my past employment, background, criminal history, education and activities. I agree to cooperate in such an investigation, and release and discharge from all liability, responsibilities, claims or damages of any kind or nature, all persons or entities requesting or supplying information pursuant to such investigation, including E.J. Fields Machine Works, Inc., any reference from whom information is obtained, and any third party which provides information used for employment purposes.

I understand that, if I am given an offer of employment, my employment may be conditioned upon satisfactory completion of a criminal history investigation that may include a fingerprint check. Further, I understand that, if I am given an offer of employment, my employment may be conditioned upon me taking and passing a physical examination, which may include a drug test and an alcohol screening. I understand that my refusal to submit to such lawful test and/or my receipt of a positive test result will disqualify me from further consideration for employment or, if I am hired, will result in my dismissal from employment.

I understand and agree that, if I am hired, my employment will be on an at-will basis, which means that either I or E.J. Fields Machine Works, Inc. can terminate the employment relationship at any time, for any reason, with or without cause, and with or without notice. I further understand that, if I am hired, I will not be employed for any specific time, and that this application is not, and is not intended to be a contract for employment of continued employment.

I certify that I have read and understand the foregoing paragraphs. I understand that this is simply an application for employment and does not imply that I will be employed. Further, I understand that any offer of employment would be contingent on my ability to produce documentation required by federal law.

Signature of Applicant: _____

Date: _____